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8  
9 **BEFORE THE**  
**MEDICAL BOARD OF CALIFORNIA**  
10 **DEPARTMENT OF CONSUMER AFFAIRS**  
11 **STATE OF CALIFORNIA**

12  
13 In the Matter of the Accusation Against:

Case No. 800-2018-046621

14 **NEDA SHAFAGHI, M.D.**  
9663 Santa Monica Blvd # 383  
15 Beverly Hills, CA 90069

**STIPULATED SETTLEMENT AND  
DISCIPLINARY ORDER**

16 **Physician's and Surgeon's Certificate No. A**  
**113082**

17  
18 Respondent.

19 IT IS HEREBY STIPULATED AND AGREED by and between the parties to the above-  
20 entitled proceedings that the following matters are true:

21 **PARTIES**

22 1. Kimberly Kirchmeyer (Complainant) is the Executive Director of the Medical Board  
23 of California (Board). She brought this action solely in her official capacity and is represented in  
24 this matter by Xavier Becerra, Attorney General of the State of California, by Jonathan Nguyen,  
25 Deputy Attorney General.

26 2. Respondent NEDA SHAFAGHI, M.D. (Respondent) is represented in this proceeding  
27 by attorney James Blatt, Esq., Law Offices of James E. Blatt, whose address is 10100 Santa  
28 Monica Blvd., Suite 300, Los Angeles, CA 90067.

3. On or about July 1, 2010, the Board issued Physician's and Surgeon's Certificate No. A 113082 to Respondent. The Physician's and Surgeon's Certificate was in full force and effect at all times relevant to the charges brought in Accusation No. 800-2018-046621, and will expire on January 31, 2020, unless renewed.

## JURISDICTION

4. Accusation No. 800-2018-046621 was filed before the Board, and is currently pending against Respondent. The Accusation and all other statutorily required documents were properly served on Respondent on March 11, 2019. Respondent timely filed her Notice of Defense contesting the Accusation.

5. A copy of Accusation No. 800-2018-046621 is attached as exhibit A and incorporated herein by reference.

## ADVISEMENT AND WAIVERS

6. Respondent has carefully read, fully discussed with counsel, and understands the charges and allegations in Accusation No. 800-2018-046621. Respondent has also carefully read, fully discussed with counsel, and understands the effects of this Stipulated Settlement and Disciplinary Order.

7. Respondent is fully aware of her legal rights in this matter, including the right to a hearing on the charges and allegations in the Accusation; the right to confront and cross-examine the witnesses against her; the right to present evidence and to testify on her own behalf; the right to the issuance of subpoenas to compel the attendance of witnesses and the production of documents; the right to reconsideration and court review of an adverse decision; and all other rights accorded by the California Administrative Procedure Act and other applicable laws.

8. Respondent voluntarily, knowingly, and intelligently waives and gives up each and every right set forth above.

CULPABILITY

9. Respondent understands and agrees that the charges and allegations in Accusation No. 800-2018-046621, if proven at a hearing, constitute cause for imposing discipline upon her Physician's and Surgeon's Certificate.

10. For the purpose of resolving the Accusation without the expense and uncertainty of further proceedings, Respondent agrees that, at a hearing, Complainant could establish a factual basis for the charges in the Accusation, and that Respondent hereby gives up her right to contest those charges.

11. Respondent agrees that her Physician's and Surgeon's Certificate is subject to discipline and she agrees to be bound by the Board's probationary terms as set forth in the Disciplinary Order below.

12. Respondent agrees that if she ever petitions for early termination or modification of probation, or if the Board ever petitions for revocation of probation, all of the charges and allegations contained in Accusation No. 800-2018-046621 shall be deemed true, correct and fully admitted by Respondent for purposes of that proceeding or any other licensing proceeding involving Respondent in the State of California.

## CONTINGENCY

13. This stipulation shall be subject to approval by the Medical Board of California. Respondent understands and agrees that counsel for Complainant and the staff of the Medical Board of California may communicate directly with the Board regarding this stipulation and settlement, without notice to or participation by Respondent or her counsel. By signing the stipulation, Respondent understands and agrees that she may not withdraw her agreement or seek to rescind the stipulation prior to the time the Board considers and acts upon it. If the Board fails to adopt this stipulation as its Decision and Order, the Stipulated Settlement and Disciplinary Order shall be of no force or effect, except for this paragraph, it shall be inadmissible in any legal action between the parties, and the Board shall not be disqualified from further action by having considered this matter.

14. The parties understand and agree that Portable Document Format (PDF) and facsimile copies of this Stipulated Settlement and Disciplinary Order, including PDF and facsimile signatures thereto, shall have the same force and effect as the originals.

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15. In consideration of the foregoing admissions and stipulations, the parties agree that the Board may, without further notice or formal proceeding, issue and enter the following Disciplinary Order:

## DISCIPLINARY ORDER

IT IS HEREBY ORDERED that Physician's and Surgeon's Certificate No. A 113082 issued to Respondent is revoked. However, the revocation is stayed and Respondent is placed on probation for seven (7) years on the following terms and conditions.

1. CONTROLLED SUBSTANCES - ABSTAIN FROM USE. Respondent shall abstain completely from the personal use or possession of controlled substances as defined in the California Uniform Controlled Substances Act, dangerous drugs as defined by Business and Professions Code section 4022, and any drugs requiring a prescription. This prohibition does not apply to medications lawfully prescribed to Respondent by another practitioner for a bona fide illness or condition.

Within 15 calendar days of receiving any lawfully prescribed medications, Respondent shall notify the Board or its designee of the: issuing practitioner's name, address, and telephone number; medication name, strength, and quantity; and issuing pharmacy name, address, and telephone number.

2. ALCOHOL - ABSTAIN FROM USE. Respondent shall abstain completely from the use of products or beverages containing alcohol.

3. PSYCHOTHERAPY. Within 60 calendar days of the effective date of this Decision, Respondent shall submit to the Board or its designee for prior approval the name and qualifications of a California-licensed board certified psychiatrist or a licensed psychologist who has a doctoral degree in psychology and at least five years of postgraduate experience in the diagnosis and treatment of emotional and mental disorders. Upon approval, Respondent shall undergo and continue psychotherapy treatment, including any modifications to the frequency of psychotherapy, until the Board or its designee deems that no further psychotherapy is necessary.

The psychotherapist shall consider any information provided by the Board or its designee and any other information the psychotherapist deems relevant and shall furnish a written

1 evaluation report to the Board or its designee. Respondent shall cooperate in providing the  
2 psychotherapist with any information and documents that the psychotherapist may deem  
3 pertinent.

4 Respondent shall have the treating psychotherapist submit quarterly status reports to the  
5 Board or its designee. The Board or its designee may require Respondent to undergo psychiatric  
6 evaluations by a Board-appointed board certified psychiatrist. If, prior to the completion of  
7 probation, Respondent is found to be mentally unfit to resume the practice of medicine without  
8 restrictions, the Board shall retain continuing jurisdiction over Respondent's license and the  
9 period of probation shall be extended until the Board determines that Respondent is mentally fit  
10 to resume the practice of medicine without restrictions.

11 Respondent shall pay the cost of all psychotherapy and psychiatric evaluations.

12 4. MEDICAL EVALUATION AND TREATMENT. Within 30 calendar days of the  
13 effective date of this Decision, and on a periodic basis thereafter as may be required by the Board  
14 or its designee, Respondent shall undergo a medical evaluation by a Board-appointed physician  
15 who shall consider any information provided by the Board or designee and any other information  
16 the evaluating physician deems relevant and shall furnish a medical report to the Board or its  
17 designee. Respondent shall provide the evaluating physician with any information and  
18 documentation that the evaluating physician may deem pertinent.

19 Following the evaluation, Respondent shall comply with all restrictions or conditions  
20 recommended by the evaluating physician within 15 calendar days after being notified by the  
21 Board or its designee. If Respondent is required by the Board or its designee to undergo medical  
22 treatment, Respondent shall within 30 calendar days of the requirement notice, submit to the  
23 Board or its designee for prior approval the name and qualifications of a California licensed  
24 treating physician of Respondent's choice. Upon approval of the treating physician, Respondent  
25 shall within 15 calendar days undertake medical treatment and shall continue such treatment until  
26 further notice from the Board or its designee.

27 The treating physician shall consider any information provided by the Board or its designee  
28 or any other information the treating physician may deem pertinent prior to commencement of

1 treatment. Respondent shall have the treating physician submit quarterly reports to the Board or  
2 its designee indicating whether or not the Respondent is capable of practicing medicine safely.  
3 Respondent shall provide the Board or its designee with any and all medical records pertaining to  
4 treatment that the Board or its designee deems necessary.

5 If, prior to the completion of probation, Respondent is found to be physically incapable of  
6 resuming the practice of medicine without restrictions, the Board shall retain continuing  
7 jurisdiction over Respondent's license and the period of probation shall be extended until the  
8 Board determines that Respondent is physically capable of resuming the practice of medicine  
9 without restrictions. Respondent shall pay the cost of the medical evaluation(s) and treatment.

10 5. SOLO PRACTICE PROHIBITION. Respondent is prohibited from engaging in the  
11 solo practice of medicine. Prohibited solo practice includes, but is not limited to, a practice  
12 where: 1) Respondent merely shares office space with another physician but is not affiliated for  
13 purposes of providing patient care, or 2) Respondent is the sole physician practitioner at that  
14 location.

15 If Respondent fails to establish a practice with another physician or secure employment in  
16 an appropriate practice setting within 60 calendar days of the effective date of this Decision,  
17 Respondent shall receive a notification from the Board or its designee to cease the practice of  
18 medicine within three (3) calendar days after being so notified. The Respondent shall not resume  
19 practice until an appropriate practice setting is established.

20 If, during the course of the probation, the Respondent's practice setting changes and the  
21 Respondent is no longer practicing in a setting in compliance with this Decision, the Respondent  
22 shall notify the Board or its designee within five (5) calendar days of the practice setting change.  
23 If Respondent fails to establish a practice with another physician or secure employment in an  
24 appropriate practice setting within 60 calendar days of the practice setting change, Respondent  
25 shall receive a notification from the Board or its designee to cease the practice of medicine within  
26 three (3) calendar days after being so notified. The Respondent shall not resume practice until an  
27 appropriate practice setting is established.

28 6. CLINICAL DIAGNOSTIC EVALUATIONS AND REPORTS: Within thirty (30)

1 calendar days of the effective date of this Decision, and on whatever periodic basis thereafter as  
2 may be required by the Board or its designee, Respondent shall undergo and complete a clinical  
3 diagnostic evaluation, including any and all testing deemed necessary, by a Board-appointed  
4 board certified physician and surgeon. The examiner shall consider any information provided by  
5 the Board or its designee and any other information he or she deems relevant, and shall furnish a  
6 written evaluation report to the Board or its designee.

7 The clinical diagnostic evaluation shall be conducted by a licensed physician and surgeon  
8 who holds a valid, unrestricted license, has three (3) years' experience in providing evaluations of  
9 physicians and surgeons with substance abuse disorders, and is approved by the Board or its  
10 designee. The clinical diagnostic evaluation shall be conducted in accordance with acceptable  
11 professional standards for conducting substance abuse clinical diagnostic evaluations. The  
12 evaluator shall not have a current or former financial, personal, or business relationship with  
13 Respondent within the last five (5) years. The evaluator shall provide an objective, unbiased, and  
14 independent evaluation. The clinical diagnostic evaluation report shall set forth, in the  
15 evaluator's opinion, whether Respondent has a substance abuse problem, whether Respondent is a  
16 threat to himself or herself or others, and recommendations for substance abuse treatment,  
17 practice restrictions, or other recommendations related to Respondent's rehabilitation and ability  
18 to practice safely. If the evaluator determines during the evaluation process that Respondent is a  
19 threat to himself or herself or others, the evaluator shall notify the Board within twenty-four (24)  
20 hours of such a determination.

21 In formulating his or her opinion as to whether Respondent is safe to return to either part-  
22 time or full-time practice and what restrictions or recommendations should be imposed, including  
23 participation in an inpatient or outpatient treatment program, the evaluator shall consider the  
24 following factors: Respondent's license type; Respondent's history; Respondent's documented  
25 length of sobriety (i.e., length of time that has elapsed since Respondent's last substance use);  
26 Respondent's scope and pattern of substance abuse; Respondent's treatment history, medical  
27 history and current medical condition; the nature, duration and severity of Respondent's  
28 substance abuse problem or problems; and whether Respondent is a threat to himself or herself or



1 the public.

2 For all clinical diagnostic evaluations, a final written report shall be provided to the Board  
3 no later than ten (10) days from the date the evaluator is assigned the matter. If the evaluator  
4 requests additional information or time to complete the evaluation and report, an extension may  
5 be granted, but shall not exceed thirty (30) days from the date the evaluator was originally  
6 assigned the matter.

7 The Board shall review the clinical diagnostic evaluation report within five (5) business  
8 days of receipt to determine whether Respondent is safe to return to either part-time or full-time  
9 practice and what restrictions or recommendations shall be imposed on Respondent based on the  
10 recommendations made by the evaluator. Respondent shall not be returned to practice until he or  
11 she has at least thirty (30) days of negative biological fluid tests or biological fluid tests indicating  
12 that he or she has not used, consumed, ingested, or administered to himself or herself a prohibited  
13 substance, as defined in section 1361.51, subdivision (e), of Title 16 of the California Code of  
14 Regulations.

15 Clinical diagnostic evaluations conducted prior to the effective date of this Decision shall  
16 not be accepted towards the fulfillment of this requirement. The cost of the clinical diagnostic  
17 evaluation, including any and all testing deemed necessary by the examiner, the Board or its  
18 designee, shall be borne by the licensee.

19 Respondent shall not engage in the practice of medicine until notified by the Board or its  
20 designee that he or she is fit to practice medicine safely. The period of time that Respondent is  
21 not practicing medicine shall not be counted toward completion of the term of probation.  
22 Respondent shall undergo biological fluid testing as required in this Decision at least two (2)  
23 times per week while awaiting the notification from the Board if he or she is fit to practice  
24 medicine safely.

25 Respondent shall comply with all restrictions or conditions recommended by the examiner  
26 conducting the clinical diagnostic evaluation within fifteen (15) calendar days after being notified  
27 by the Board or its designee.

28 7. NOTICE OF EMPLOYER OR SUPERVISOR INFORMATION. Within seven (7)

1 days of the effective date of this Decision, Respondent shall provide to the Board the names,  
2 physical addresses, mailing addresses, and telephone numbers of any and all employers and  
3 supervisors. Respondent shall also provide specific, written consent for the Board, Respondent's  
4 worksite monitor, and Respondent's employers and supervisors to communicate regarding  
5 Respondent's work status, performance, and monitoring.

6 For purposes of this section, "supervisors" shall include the Chief of Staff and Health or  
7 Well Being Committee Chair, or equivalent, if applicable, when the Respondent has medical staff  
8 privileges.

9 8. BIOLOGICAL FLUID TESTING. Respondent shall immediately submit to  
10 biological fluid testing, at Respondent's expense, upon request of the Board or its designee.  
11 "Biological fluid testing" may include, but is not limited to, urine, blood, breathalyzer, hair  
12 follicle testing, or similar drug screening approved by the Board or its designee. Respondent shall  
13 make daily contact with the Board or its designee to determine whether biological fluid testing is  
14 required. Respondent shall be tested on the date of the notification as directed by the Board or its  
15 designee. The Board may order a Respondent to undergo a biological fluid test on any day, at  
16 any time, including weekends and holidays. Except when testing on a specific date as ordered by  
17 the Board or its designee, the scheduling of biological fluid testing shall be done on a random  
18 basis. The cost of biological fluid testing shall be borne by the Respondent.

19 During the first year of probation, Respondent shall be subject to 52 to 104 random tests.  
20 During the second year of probation and for the duration of the probationary term, up to five (5)  
21 years, Respondent shall be subject to 36 to 104 random tests per year. Only if there has been no  
22 positive biological fluid tests in the previous five (5) consecutive years of probation, may testing  
23 be reduced to one (1) time per month. Nothing precludes the Board from increasing the number  
24 of random tests to the first-year level of frequency for any reason.

25 Prior to practicing medicine, Respondent shall contract with a laboratory or service,  
26 approved in advance by the Board or its designee, that will conduct random, unannounced,  
27 observed, biological fluid testing and meets all of the following standards:

28 (a) Its specimen collectors are either certified by the Drug and Alcohol Testing Industry

1 Association or have completed the training required to serve as a collector for the United  
2 States Department of Transportation.

3 (b) Its specimen collectors conform to the current United States Department of  
4 Transportation Specimen Collection Guidelines.

5 (c) Its testing locations comply with the Urine Specimen Collection Guidelines published  
6 by the United States Department of Transportation without regard to the type of test  
7 administered.

8 (d) Its specimen collectors observe the collection of testing specimens.

9 (e) Its laboratories are certified and accredited by the United States Department of Health  
10 and Human Services.

11 (f) Its testing locations shall submit a specimen to a laboratory within one (1) business day  
12 of receipt and all specimens collected shall be handled pursuant to chain of custody  
13 procedures. The laboratory shall process and analyze the specimens and provide legally  
14 defensible test results to the Board within seven (7) business days of receipt of the  
15 specimen. The Board will be notified of non-negative results within one (1) business day  
16 and will be notified of negative test results within seven (7) business days.

17 (g) Its testing locations possess all the materials, equipment, and technical expertise  
18 necessary in order to test Respondent on any day of the week.

19 (h) Its testing locations are able to scientifically test for urine, blood, and hair specimens  
20 for the detection of alcohol and illegal and controlled substances.

21 (i) It maintains testing sites located throughout California.

22 (j) It maintains an automated 24-hour toll-free telephone system and/or a secure on-line  
23 computer database that allows the Respondent to check in daily for testing.

24 (k) It maintains a secure, HIPAA-compliant website or computer system that allows staff  
25 access to drug test results and compliance reporting information that is available 24 hours a  
26 day.

27 (l) It employs or contracts with toxicologists that are licensed physicians and have  
28 knowledge of substance abuse disorders and the appropriate medical training to interpret

1 and evaluate laboratory biological fluid test results, medical histories, and any other  
2 information relevant to biomedical information.

3 (m) It will not consider a toxicology screen to be negative if a positive result is obtained  
4 while practicing, even if the Respondent holds a valid prescription for the substance.

5 Prior to changing testing locations for any reason, including during vacation or other travel,  
6 alternative testing locations must be approved by the Board and meet the requirements above.

7 The contract shall require that the laboratory directly notify the Board or its designee of  
8 non-negative results within one (1) business day and negative test results within seven (7)  
9 business days of the results becoming available. Respondent shall maintain this laboratory or  
10 service contract during the period of probation.

11 A certified copy of any laboratory test result may be received in evidence in any  
12 proceedings between the Board and Respondent.

13 If a biological fluid test result indicates Respondent has used, consumed, ingested, or  
14 administered to himself or herself a prohibited substance, the Board shall order Respondent to  
15 cease practice and instruct Respondent to leave any place of work where Respondent is practicing  
16 medicine or providing medical services. The Board shall immediately notify all of Respondent's  
17 employers, supervisors and work monitors, if any, that Respondent may not practice medicine or  
18 provide medical services while the cease-practice order is in effect.

19 A biological fluid test will not be considered negative if a positive result is obtained while  
20 practicing, even if the practitioner holds a valid prescription for the substance. If no prohibited  
21 substance use exists, the Board shall lift the cease-practice order within one (1) business day.

22 After the issuance of a cease-practice order, the Board shall determine whether the positive  
23 biological fluid test is in fact evidence of prohibited substance use by consulting with the  
24 specimen collector and the laboratory, communicating with the licensee, his or her treating  
25 physician(s), other health care provider, or group facilitator, as applicable.

26 For purposes of this condition, the terms "biological fluid testing" and "testing" mean the  
27 acquisition and chemical analysis of a Respondent's urine, blood, breath, or hair.

28 For purposes of this condition, the term "prohibited substance" means an illegal drug, a

1 lawful drug not prescribed or ordered by an appropriately licensed health care provider for use by  
2 Respondent and approved by the Board, alcohol, or any other substance the Respondent has been  
3 instructed by the Board not to use, consume, ingest, or administer to himself or herself.

4 If the Board confirms that a positive biological fluid test is evidence of use of a prohibited  
5 substance, Respondent has committed a major violation, as defined in section 1361.52(a), and the  
6 Board shall impose any or all of the consequences set forth in section 1361.52(b), in addition to  
7 any other terms or conditions the Board determines are necessary for public protection or to  
8 enhance Respondent's rehabilitation.

9 9. SUBSTANCE ABUSE SUPPORT GROUP MEETINGS. Within thirty (30) days of  
10 the effective date of this Decision, Respondent shall submit to the Board or its designee, for its  
11 prior approval, the name of a substance abuse support group which he or she shall attend for the  
12 duration of probation. Respondent shall attend substance abuse support group meetings at least  
13 once per week, or as ordered by the Board or its designee. Respondent shall pay all substance  
14 abuse support group meeting costs.

15 The facilitator of the substance abuse support group meeting shall have a minimum of three  
16 (3) years experience in the treatment and rehabilitation of substance abuse, and shall be licensed  
17 or certified by the state or nationally certified organizations. The facilitator shall not have a  
18 current or former financial, personal, or business relationship with Respondent within the last five  
19 (5) years. Respondent's previous participation in a substance abuse group support meeting led by  
20 the same facilitator does not constitute a prohibited current or former financial, personal, or  
21 business relationship.

22 The facilitator shall provide a signed document to the Board or its designee showing  
23 Respondent's name, the group name, the date and location of the meeting, Respondent's  
24 attendance, and Respondent's level of participation and progress. The facilitator shall report any  
25 unexcused absence by Respondent from any substance abuse support group meeting to the Board,  
26 or its designee, within twenty-four (24) hours of the unexcused absence.

27 10. WORKSITE MONITOR FOR SUBSTANCE-ABUSING LICENSEE. Within thirty  
28 (30) calendar days of the effective date of this Decision, Respondent shall submit to the Board or

1 its designee for prior approval as a worksite monitor, the name and qualifications of one or more  
2 licensed physician and surgeon, other licensed health care professional if no physician and  
3 surgeon is available, or, as approved by the Board or its designee, a person in a position of  
4 authority who is capable of monitoring the Respondent at work.

5 The worksite monitor shall not have a current or former financial, personal, or familial  
6 relationship with Respondent, or any other relationship that could reasonably be expected to  
7 compromise the ability of the monitor to render impartial and unbiased reports to the Board or its  
8 designee. If it is impractical for anyone but Respondent's employer to serve as the worksite  
9 monitor, this requirement may be waived by the Board or its designee, however, under no  
10 circumstances shall Respondent's worksite monitor be an employee or supervisee of the licensee.

11 The worksite monitor shall have an active unrestricted license with no disciplinary action  
12 within the last five (5) years, and shall sign an affirmation that he or she has reviewed the terms  
13 and conditions of Respondent's disciplinary order and agrees to monitor Respondent as set forth  
14 by the Board or its designee.

15 Respondent shall pay all worksite monitoring costs.

16 The worksite monitor shall have face-to-face contact with Respondent in the work  
17 environment on as frequent a basis as determined by the Board or its designee, but not less than  
18 once per week; interview other staff in the office regarding Respondent's behavior, if requested  
19 by the Board or its designee; and review Respondent's work attendance.

20 The worksite monitor shall verbally report any suspected substance abuse to the Board and  
21 Respondent's employer or supervisor within one (1) business day of occurrence. If the suspected  
22 substance abuse does not occur during the Board's normal business hours, the verbal report shall  
23 be made to the Board or its designee within one (1) hour of the next business day. A written  
24 report that includes the date, time, and location of the suspected abuse; Respondent's actions; and  
25 any other information deemed important by the worksite monitor shall be submitted to the Board  
26 or its designee within 48 hours of the occurrence.

27 The worksite monitor shall complete and submit a written report monthly or as directed by  
28 the Board or its designee which shall include the following: (1) Respondent's name and

1 Physician's and Surgeon's Certificate number; (2) the worksite monitor's name and signature; (3)  
2 the worksite monitor's license number, if applicable; (4) the location or location(s) of the  
3 worksite; (5) the dates Respondent had face-to-face contact with the worksite monitor; (6) the  
4 names of worksite staff interviewed, if applicable; (7) a report of Respondent's work attendance;  
5 (8) any change in Respondent's behavior and/or personal habits; and (9) any indicators that can  
6 lead to suspected substance abuse by Respondent. Respondent shall complete any required  
7 consent forms and execute agreements with the approved worksite monitor and the Board, or its  
8 designee, authorizing the Board, or its designee, and worksite monitor to exchange information.

9 If the worksite monitor resigns or is no longer available, Respondent shall, within five (5)  
10 calendar days of such resignation or unavailability, submit to the Board or its designee, for prior  
11 approval, the name and qualifications of a replacement monitor who will be assuming that  
12 responsibility within fifteen (15) calendar days. If Respondent fails to obtain approval of a  
13 replacement monitor within sixty (60) calendar days of the resignation or unavailability of the  
14 monitor, Respondent shall receive a notification from the Board or its designee to cease the  
15 practice of medicine within three (3) calendar days after being so notified. Respondent shall  
16 cease the practice of medicine until a replacement monitor is approved and assumes monitoring  
17 responsibility.

18 11. VIOLATION OF PROBATION CONDITION FOR SUBSTANCE ABUSING  
19 LICENSEES. Failure to fully comply with any term or condition of probation is a violation of  
20 probation.

21 A. If Respondent commits a major violation of probation as defined by section  
22 1361.52, subdivision (a), of Title 16 of the California Code of Regulations, the Board shall take  
23 one or more of the following actions:

24 (1) Issue an immediate cease-practice order and order Respondent to undergo a clinical  
25 diagnostic evaluation to be conducted in accordance with section 1361.5, subdivision (c)(1), of  
26 Title 16 of the California Code of Regulations, at Respondent's expense. The cease-practice  
27 order issued by the Board or its designee shall state that Respondent must test negative for at least  
28 a month of continuous biological fluid testing before being allowed to resume practice. For

1 purposes of determining the length of time a Respondent must test negative while undergoing  
2 continuous biological fluid testing following issuance of a cease-practice order, a month is  
3 defined as thirty calendar (30) days. Respondent may not resume the practice of medicine until  
4 notified in writing by the Board or its designee that he or she may do so.

5 (2) Increase the frequency of biological fluid testing.

6 (3) Refer Respondent for further disciplinary action, such as suspension, revocation, or  
7 other action as determined by the Board or its designee.

8 B. If Respondent commits a minor violation of probation as defined by section  
9 1361.52, subdivision (c), of Title 16 of the California Code of Regulations, the Board shall take  
10 one or more of the following actions:

11 (1) Issue a cease-practice order;

12 (2) Order practice limitations;

13 (3) Order or increase supervision of Respondent;

14 (4) Order increased documentation;

15 (5) Issue a citation and fine, or a warning letter;

16 (6) Order Respondent to undergo a clinical diagnostic evaluation to be conducted in  
17 accordance with section 1361.5, subdivision (c)(1), of Title 16 of the California Code of  
18 Regulations, at Respondent's expense;

19 (7) Take any other action as determined by the Board or its designee.

20 C. Nothing in this Decision shall be considered a limitation on the Board's authority  
21 to revoke Respondent's probation if he or she has violated any term or condition of probation. If  
22 Respondent violates probation in any respect, the Board, after giving Respondent notice and the  
23 opportunity to be heard, may revoke probation and carry out the disciplinary order that was  
24 stayed. If an Accusation, or Petition to Revoke Probation, or an Interim Suspension Order is filed  
25 against Respondent during probation, the Board shall have continuing jurisdiction until the matter  
26 is final, and the period of probation shall be extended until the matter is final.

27 12. NOTIFICATION. Within seven (7) days of the effective date of this Decision, the  
28 Respondent shall provide a true copy of this Decision and Accusation to the Chief of Staff or the



1 Chief Executive Officer at every hospital where privileges or membership are extended to  
2 Respondent, at any other facility where Respondent engages in the practice of medicine,  
3 including all physician and locum tenens registries or other similar agencies, and to the Chief  
4 Executive Officer at every insurance carrier which extends malpractice insurance coverage to  
5 Respondent. Respondent shall submit proof of compliance to the Board or its designee within 15  
6 calendar days.

7 This condition shall apply to any change(s) in hospitals, other facilities or insurance carrier.

8 13. SUPERVISION OF PHYSICIAN ASSISTANTS AND ADVANCED PRACTICE  
9 NURSES. During probation, Respondent is prohibited from supervising physician assistants and  
10 advanced practice nurses.

11 14. OBEY ALL LAWS. Respondent shall obey all federal, state and local laws, all rules  
12 governing the practice of medicine in California and remain in full compliance with any court  
13 ordered criminal probation, payments, and other orders.

14 15. QUARTERLY DECLARATIONS. Respondent shall submit quarterly declarations  
15 under penalty of perjury on forms provided by the Board, stating whether there has been  
16 compliance with all the conditions of probation.

17 Respondent shall submit quarterly declarations not later than 10 calendar days after the end  
18 of the preceding quarter.

19 16. GENERAL PROBATION REQUIREMENTS.

20 Compliance with Probation Unit

21 Respondent shall comply with the Board's probation unit.

22 Address Changes

23 Respondent shall, at all times, keep the Board informed of Respondent's business and  
24 residence addresses, email address (if available), and telephone number. Changes of such  
25 addresses shall be immediately communicated in writing to the Board or its designee. Under no  
26 circumstances shall a post office box serve as an address of record, except as allowed by Business  
27 and Professions Code section 2021(b).

28 Place of Practice

1 Respondent shall not engage in the practice of medicine in Respondent's or patient's place  
2 of residence, unless the patient resides in a skilled nursing facility or other similar licensed  
3 facility.

4 License Renewal

5 Respondent shall maintain a current and renewed California physician's and surgeon's  
6 license.

7 Travel or Residence Outside California

8 Respondent shall immediately inform the Board or its designee, in writing, of travel to any  
9 areas outside the jurisdiction of California which lasts, or is contemplated to last, more than thirty  
10 (30) calendar days.

11 In the event Respondent should leave the State of California to reside or to practice,  
12 Respondent shall notify the Board or its designee in writing 30 calendar days prior to the dates of  
13 departure and return.

14 17. INTERVIEW WITH THE BOARD OR ITS DESIGNEE. Respondent shall be  
15 available in person upon request for interviews either at Respondent's place of business or at the  
16 probation unit office, with or without prior notice throughout the term of probation.

17 18. NON-PRACTICE WHILE ON PROBATION. Respondent shall notify the Board or  
18 its designee in writing within 15 calendar days of any periods of non-practice lasting more than  
19 30 calendar days and within 15 calendar days of Respondent's return to practice. Non-practice is  
20 defined as any period of time Respondent is not practicing medicine as defined in Business and  
21 Professions Code sections 2051 and 2052 for at least 40 hours in a calendar month in direct  
22 patient care, clinical activity or teaching, or other activity as approved by the Board. If  
23 Respondent resides in California and is considered to be in non-practice, Respondent shall  
24 comply with all terms and conditions of probation. All time spent in an intensive training  
25 program which has been approved by the Board or its designee shall not be considered non-  
26 practice and does not relieve Respondent from complying with all the terms and conditions of  
27 probation. Practicing medicine in another state of the United States or Federal jurisdiction while  
28 on probation with the medical licensing authority of that state or jurisdiction shall not be

1 considered non-practice. A Board-ordered suspension of practice shall not be considered as a  
2 period of non-practice.

3 In the event Respondent's period of non-practice while on probation exceeds 18 calendar  
4 months, Respondent shall successfully complete the Federation of State Medical Boards' Special  
5 Purpose Examination, or, at the Board's discretion, a clinical competence assessment program  
6 that meets the criteria of Condition 18 of the current version of the Board's "Manual of Model  
7 Disciplinary Orders and Disciplinary Guidelines" prior to resuming the practice of medicine.

8 Respondent's period of non-practice while on probation shall not exceed two (2) years.

9 Periods of non-practice will not apply to the reduction of the probationary term.

10 Periods of non-practice for a Respondent residing outside of California will relieve  
11 Respondent of the responsibility to comply with the probationary terms and conditions with the  
12 exception of this condition and the following terms and conditions of probation: Obey All Laws;  
13 General Probation Requirements; Quarterly Declarations; Abstain from the Use of Alcohol and/or  
14 Controlled Substances; and Biological Fluid Testing.

15 19. COMPLETION OF PROBATION. Respondent shall comply with all financial  
16 obligations (e.g., restitution, probation costs) not later than 120 calendar days prior to the  
17 completion of probation. Upon successful completion of probation, Respondent's certificate shall  
18 be fully restored.

19 20. VIOLATION OF PROBATION. Failure to fully comply with any term or condition  
20 of probation is a violation of probation. If Respondent violates probation in any respect, the  
21 Board, after giving Respondent notice and the opportunity to be heard, may revoke probation and  
22 carry out the disciplinary order that was stayed. If an Accusation, or Petition to Revoke Probation,  
23 or an Interim Suspension Order is filed against Respondent during probation, the Board shall have  
24 continuing jurisdiction until the matter is final, and the period of probation shall be extended until  
25 the matter is final.

26 21. LICENSE SURRENDER. Following the effective date of this Decision, if  
27 Respondent ceases practicing due to retirement or health reasons or is otherwise unable to satisfy  
28 the terms and conditions of probation, Respondent may request to surrender his or her license.

1 The Board reserves the right to evaluate Respondent's request and to exercise its discretion in  
2 determining whether or not to grant the request, or to take any other action deemed appropriate  
3 and reasonable under the circumstances. Upon formal acceptance of the surrender, Respondent  
4 shall within 15 calendar days deliver Respondent's wallet and wall certificate to the Board or its  
5 designee and Respondent shall no longer practice medicine. Respondent will no longer be subject  
6 to the terms and conditions of probation. If Respondent re-applies for a medical license, the  
7 application shall be treated as a petition for reinstatement of a revoked certificate.

8 22. PROBATION MONITORING COSTS. Respondent shall pay the costs associated  
9 with probation monitoring each and every year of probation, as designated by the Board, which  
10 may be adjusted on an annual basis. Such costs shall be payable to the Medical Board of  
11 California and delivered to the Board or its designee no later than January 31 of each calendar  
12 year.

13 ACCEPTANCE

14 I have carefully read the above Stipulated Settlement and Disciplinary Order and have fully  
15 discussed it with my attorney. I understand the stipulation and the effect it will have on my  
16 Physician's and Surgeon's Certificate. I enter into this Stipulated Settlement and Disciplinary  
17 Order voluntarily, knowingly, and intelligently, and agree to be bound by the Decision and Order  
18 of the Medical Board of California.

19  
20 DATED:

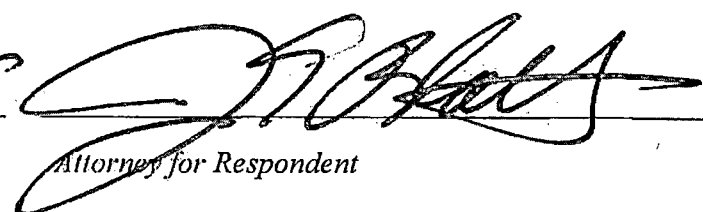
6/17/19

21   
NEDA SHAFAGHI, M.D.  
Respondent

22  
23 I have read and fully discussed with Respondent NEDA SHAFAGHI, M.D. the terms and  
24 conditions and other matters contained in the above Stipulated Settlement and Disciplinary Order.  
25 I approve its form and content.

26 DATED:

6-18-19

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Attorney for Respondent

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Dated: June 21, 2019

XAVIER BECERRA  
Attorney General of California  
JUDITH T. ALVARADO  
Supervising Deputy Attorney General

LA2019500103

**Exhibit A**

**Accusation No. 800-2018-046621**

1 XAVIER BECERRA  
2 Attorney General of California  
3 E. A. JONES III  
4 Supervising Deputy Attorney General  
5 CINDY M. LOPEZ  
6 Deputy Attorney General  
7 State Bar No. 119988  
8 California Department of Justice  
9 300 So. Spring Street, Suite 1702  
10 Los Angeles, CA 90013  
11 Telephone: (213) 269-6494  
12 Facsimile: (213) 897-9395  
13 *Attorneys for Complainant*

FILED  
STATE OF CALIFORNIA  
MEDICAL BOARD OF CALIFORNIA  
SACRAMENTO March 11 20 19  
BY Sara Gibson ANALYST

BEFORE THE  
MEDICAL BOARD OF CALIFORNIA  
DEPARTMENT OF CONSUMER AFFAIRS  
STATE OF CALIFORNIA

In the Matter of the Accusation Against:

Case No. 800-2018-046621

Neda Shafaghi, M.D.  
9663 Santa Monica Blvd # 383  
Beverly Hills, CA 90210-4303

ACCUSATION

Physician's and Surgeon's Certificate  
No. A 113082,

Respondent:

Complainant alleges:

PARTIES

1. Kimberly Kirchmeyer (Complainant) brings this Accusation solely in her official capacity as the Executive Director of the Medical Board of California, Department of Consumer Affairs (Board).

2. On or about July 1, 2010, the Medical Board issued Physician's and Surgeon's Certificate Number A 113082 to Neda Shafaghi, M.D. (Respondent). The Physician's and Surgeon's Certificate was in full force and effect at all times relevant to the charges brought herein and will expire on January 31, 2020, unless renewed. Respondent's license was

1 temporarily suspended on February 22, 2019, pursuant to an *Ex Parte* Petition for Interim  
2 Suspension Order.

### 3 JURISDICTION

4 3. This Accusation is brought before the Board, under the authority of the following  
5 laws. All section references are to the Business and Professions Code unless otherwise indicated.

6 4. Section 2227 of the Code provides that a licensee who is found guilty under the  
7 Medical Practice Act may have his or her license revoked, suspended for a period not to exceed  
8 one year, placed on probation and required to pay the costs of probation monitoring, or such other  
9 action taken in relation to discipline as the Board deems proper.

10 5. Section 2234 of the Code, states:

11 "The board shall take action against any licensee who is charged with unprofessional  
12 conduct. In addition to other provisions of this article, unprofessional conduct includes, but is not  
13 limited to, the following:

14 "(a) Violating or attempting to violate, directly or indirectly, assisting in or abetting the  
15 violation of, or conspiring to violate any provision of this chapter.

16 "(b) Gross negligence.

17 "(c) Repeated negligent acts. To be repeated, there must be two or more negligent acts or  
18 omissions. An initial negligent act or omission followed by a separate and distinct departure from  
19 the applicable standard of care shall constitute repeated negligent acts.

20 "(1) An initial negligent diagnosis followed by an act or omission medically appropriate for  
21 that negligent diagnosis of the patient shall constitute a single negligent act.

22 "(2) When the standard of care requires a change in the diagnosis, act, or omission that  
23 constitutes the negligent act described in paragraph (1), including, but not limited to, a  
24 reevaluation of the diagnosis or a change in treatment, and the licensee's conduct departs from the  
25 applicable standard of care, each departure constitutes a separate and distinct breach of the  
26 standard of care.

27 "(d) Incompetence.



1       “(e) The commission of any act involving dishonesty or corruption which is substantially  
2 related to the qualifications, functions, or duties of a physician and surgeon.

3       “(f) Any action or conduct which would have warranted the denial of a certificate.

4       “(g) The practice of medicine from this state into another state or country without meeting  
5 the legal requirements of that state or country for the practice of medicine. Section 2314 shall not  
6 apply to this subdivision. This subdivision shall become operative upon the implementation of the  
7 proposed registration program described in Section 2052.5.

8       “(h) The repeated failure by a certificate holder, in the absence of good cause, to attend and  
9 participate in an interview by the board. This subdivision shall only apply to a certificate holder  
10 who is the subject of an investigation by the board.”

11       6.     Section 820 of the Code states:

12       “Whenever it appears that any person holding a license, certificate or permit under this  
13 division or under any initiative act referred to in this division may be unable to practice his or her  
14 profession safely because the licentiate’s ability to practice is impaired due to mental illness, or  
15 physical illness affecting competency, the licensing agency may order the licentiate to be  
16 examined by one or more physicians and surgeons or psychologists designated by the agency.  
17 The report of the examiners shall be made available to the licentiate and may be received as direct  
18 evidence in proceedings conducted pursuant to Section 822.”

19       7.     Section 821 of the Code provides that the licentiate’s failure to comply with an order  
20 issued under section 820 shall constitute grounds for the suspension or revocation of the  
21 licentiate’s certificate of license.

22       8.     Section 822 of the Code states:

23       “ If a licensing agency determines that its licentiate’s ability to practice his or her  
24 profession safely is impaired because the licentiate is mentally ill, or physically ill affecting  
25 competency, the licensing agency may take action by any one of the following methods:

26       “(a) Revoking the licentiate’s certificate or license.

27       “(b) Suspending the licentiate’s right to practice.

28       “(c) Placing the licentiate on probation.

1       “(d) Taking such other action in relation to the licensee as the licensing agency in its  
2 discretion deems proper.

3       “The licensing section shall not reinstate a revoked or suspended certificate or license until  
4 it has received competent evidence of the absence or control of the condition which caused its  
5 action and until it is satisfied that with due regard for the public health and safety the person’s  
6 right to practice his or her profession may be safely reinstated.”

### 7 8                                   **FIRST CAUSE FOR DISCIPLINE**

#### 9                           **(Failure to Appear for Psychiatric Evaluation)**

10       9.     Respondent is subject to disciplinary action under sections 820 and 821 in that she  
11 failed to appear for her psychiatric evaluation pursuant to an 820 petition. The circumstances are  
12 as follows:

13       A.     This case started out as a complaint regarding Respondent's husband, claiming that he  
14 was responsible for Respondent's drug addiction. During an interview with an investigator with  
15 Health Quality Investigation Unit (HQIU), Respondent admitted that she was an addict and was  
16 treated at the Betty Ford clinic, but at the time she claimed she was not practicing medicine. The  
17 investigator obtained a copy of a child abuse report which alleged that her child was neglected by  
18 Respondent and her husband. The report also indicated that Respondent was currently on a 5150  
19 hold; based on all of this information, an investigation was opened on Respondent.

20       B.     A CURES report indicated that Respondent was prescribing medications to 5 patients  
21 in 2017 and 2018. One of the patients was her husband. This contradicted what Respondent had  
22 previously told the investigator.

23       C.     On August 17, 2018, the investigator mailed a voluntary agreement for a mental and  
24 physical exam. Previously Respondent had signed a release for her records from her two treating  
25 therapists, Dr. L. and Dr. N. On September 12, 2018, the investigator received a letter from Dr.  
26 N.'s attorney stating that the Respondent had revoked her authorization to release records. On  
27 September 13, 2018, the investigator again mailed a voluntary agreement for mental evaluation  
28 and a release for psychiatric information. On that same day, the investigator spoke with Dr. L.

1 who explained that she was part of an intervention with Respondent. Dr. L. recommended further  
2 treatment but Respondent did not make financial arrangements.

3 D. The investigator also spoke with a social worker named Ms. B. She confirmed that  
4 on May 20, 2017, she reported a suspicion of possible child abuse, and that Respondent admitted  
5 to her she was the victim of domestic violence and used both illicit and prescription drugs.

6 E. The investigator received a note from the Betty Ford Clinic indicating that  
7 Respondent was admitted on November 27, 2017, and had been in regular attendance.  
8 Respondent had several negative random drug tests.

9 F. A medical consultant, Dr. L. reviewed the documents in this case. He learned that  
10 Respondent had admitted she was a drug addict and was treated at the Betty Ford Clinic; that she  
11 claimed she was not practicing medicine but CURES revealed she had prescribed controlled  
12 substances during this time, including prescribing to her husband; and, that there was a suspected  
13 child abuse investigation involving Respondent and her husband.

14 G. Dr. L. has been in practice since 1989. He is board certified in Internal Medicine,  
15 Pulmonary Disease, and Critical Care. He is the medical director at several long-term facilities.

16 H. He opined that a physician suffering from drug addiction and suspected child abuse  
17 poses a danger to the public safety if she is allowed to continue to practice as a physician. He  
18 opined that a complete physical and psychiatric evaluation should take place to protect the health  
19 and safety of the public.

20 I. On December 5 and 6, 2018, the HQIU Investigator emailed Respondent to inform  
21 her that the 820 order would be mailed to her. On December 6, 2018, the investigator mailed a  
22 copy of the 820 order to Respondent's address of record by certified mail. He did not get it  
23 returned to him.

24 J. On several occasions after December 6, 2018, Investigator B. either emailed or called  
25 Respondent to ask her to contact him so he could arrange a time for her evaluations and not one  
26 time did Respondent call him or respond to his emails. In addition, the expert retained by the  
27 board to do the psychiatric evaluation, Dr. D., sent both letters and emails to Respondent with  
28

1 appointment details, but again, Respondent failed to respond. She did not appear at the scheduled  
2 examination.

3  
4 **SECOND CAUSE FOR DISCIPLINE**

5 **(Mental Impairment)**

6 10. Respondent is subject to disciplinary action under sections 820 and/or 822 in that  
7 there is evidence that Respondent may be suffering from a substance abuse issue. The  
8 circumstances are as follows:

9 A. Complainant incorporates the allegations contained in Paragraph 9, subparagraphs A-  
10 J, as though fully set forth herein.

11  
12 **PRAYER**

13 WHEREFORE, Complainant requests that a hearing be held on the matters herein alleged,  
14 and that following the hearing, the Medical Board of California issue a decision:


15 1. Revoking or suspending Physician's and Surgeon's Certificate Number A 113082,  
16 issued to Neda Shafaghi, M.D.;

17 2. Revoking, suspending or denying approval of Neda Shafaghi, M.D.'s authority to  
18 supervise physician assistants and advanced practice nurses;

19 3. Ordering Neda Shafaghi, M.D., if placed on probation, to pay the Board the costs of  
20 probation monitoring; and

21 4. Taking such other and further action as deemed necessary and proper.

22  
23 DATED:  
24 March 11, 2019

  
KIMBERLY KIRCHMEYER  
Executive Director  
Medical Board of California  
Department of Consumer Affairs  
State of California  
Complainant